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IDENTIFIERS	National Institute of Justice

ABSTRACT

This topical search includes 30 of the most representative citations on the subject of Acquired Immune Deficiency Syndrome (AIDS) and youth selected from the National Institute of Justice/NCJRS (National Criminal Justice Reference Service) database. Topics covered in this package include education programs for in-school youth, policies and procedures for juvenile detention facilities, pediatric AIDS, and outreach and other services for runaways. The topical search is organized by accession number, which is found at the top of each citation. Each entry also includes the following fields: title (in English), personal author, corporate author, sponsoring agency, sales agency, data of publication, country of origin, grant number, publication number, type of resource, annotation, abstract, number of pages, and language. Availability information is also provided. (TE)

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ED320072

Topical Search

AIDS and Youth

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AIDS and Youth

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TOPICAL SEARCH

AIDS and Youth

This topical search includes 30 of the most representative citations on the subject of AIDS and youth selected from the National Institute of Justice/NCJRS collection. Topics covered in this package include education programs for in-school youth, policies and procedures for juvenile detention facilities, pediatric AIDS, and outreach and other services for runaways.

Document citations are chosen from the NIJ/NCJRS data base and carefully screened by a subject specialist to identify documents that are the most representative of the issues.

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AIDS Specialist
NIJ AIDS Clearinghouse
Box 6000
Rockville, Maryland 20850
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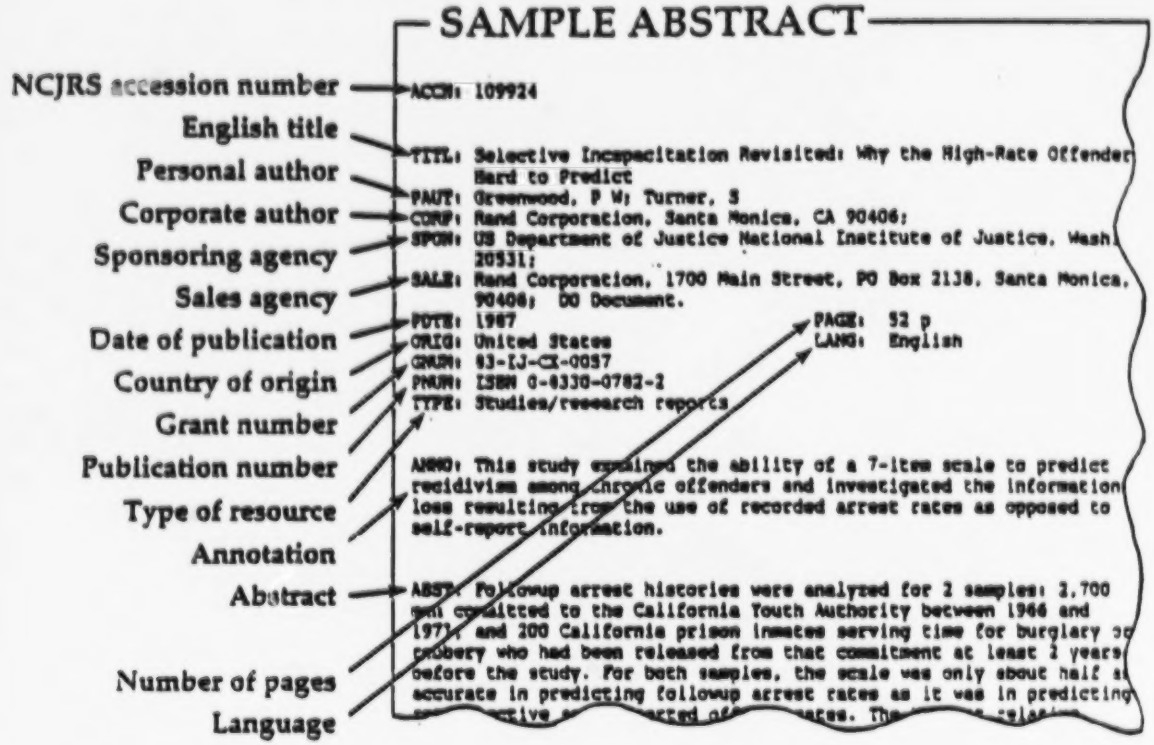
How to interpret these abstracts

SAMPLE ABSTRACT


NCJRS accession number
English title
Personal author
Corporate author
Sponsoring agency
Sales agency
Date of publication
Country of origin
Grant number
Publication number
Type of resource
Annotation
Abstract
Number of pages
Language
ACCN: 109924
TITL: Selective Incapacitation Revisited: Why the High-Rate Offender
Hard to Predict
PAUT: Greenwood, P W; Turner, S
CORP: Rand Corporation, Santa Monica, CA 90406;
SPON: US Department of Justice National Institute of Justice, Wash
20531;
SALE: Rand Corporation, 1700 Main Street, PO Box 2138, Santa Monica,
90406; 00 Document.
PDTE: 1987
ORIG: United States
GNUM: 83-IJ-CX-0037
PNUM: ISBN 0-8330-0782-2
TYPE: Studies/research reports
PAGE: 52 p
LANG: English
ANNO: This study examined the ability of a 7-item scale to predict
recidivism among chronic offenders and investigated the information
loss resulting from the use of recorded arrest rates as opposed to
self-report information.
ABST: Followup arrest histories were analyzed for 2 samples: 2,700
men committed to the California Youth Authority between 1966 and
1971, and 200 California prison inmates serving time for burglary or
robbery who had been released from that commitment at least 2 years
before the study. For both samples, the scale was only about half as
accurate in predicting followup arrest rates as it was in predicting

FIELD DESCRIPTIONS

ACCN	= NCJRS accession number	CLSS	= Document class
TITL	= English title	ORIG	= Country of origin
FTIT	= Foreign title	LANG	= Language
JCIT	= Journal citation	CNUM	= Contract number
PAUT	= Personal author	GNUM	= Grant number
EDTR	= Editor	PNUM	= Publication number
PDIR	= Project director	NOTE	= Supplemental note
CORP	= Corporate author	ANNO	= Annotation
SPON	= Sponsoring agency	ABST	= Abstract
SALE	= Sales agency	SUBJ	= Index terms
PDTE	= Date of publication	CDTE	= Date item entered into data base
PAGE	= Number of pages	TYPE	= Type of resource

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** DOCUMENT 1 OF 30 **

ACCN: 117621
TITL: AIDS Challenge: Prevention Education for Young People
SALE: Network Publications, PO Box 1830, Santa Cruz, CA 95061; PB Paperback.
PDTE: 1988 PAGE: 526 p
ORIG: United States LANG: English
PNUM: ISBN 0-941816-53-2
TYPE: Issue overviews

ANNO: These 30 papers are designed to provide educators, professionals, parents, and youth leaders with guidelines for implementing programs to provide AIDS education to children and youth from preschool through grade 12 in both school and nonschool settings.

ABST: Individual papers describe AIDS from the perspective of a person who has the disease and present medical and epidemiological information about the disease. Papers focusing on the development of prevention education discuss the steps involved in developing community support for school-based AIDS education, involving parents, training teachers, evaluating programs, involving organizations that serve youth, and providing AIDS education in a medical setting. Articles on school-based education cover issues related to the education of students in preschool through grade 3, grades 4 through 6, grades 7 through 9, and grades 10 through 12. Additional papers examine the provision of AIDS education in various religious settings, controversies regarding AIDS education, the education of minority populations, and the education of special populations such as runaways, gay and lesbian youth, hemophilic youth, and handicapped youth. Glossary, chapter reference lists, figures, tables, resource lists, and appendixes presenting guidelines and recommendations from several national organizations.

** DOCUMENT 2 OF 30 **

ACCN: 116698
TITL: Acquired Immunodeficiency Syndrome in Infants Children, and Adolescents
JCIT: Journal of Drug Issues, V 19, N 1 (Winter 1989), P 75-92
PAUT: Schwarcz, S K; Rutherford, G W
PDTE: 1989 PAGE: 18 p CLSS: Article
ORIG: United States LANG: English
TYPE: Issue overviews

ANNO: The acquired immunodeficiency syndrome (AIDS) was first described as a disease of homosexual men.

ABST: The first cases of AIDS in children were reported in 1982 and involved a transfusion recipient and four infants born to women at increased risk for AIDS. Infants may acquire their infection perinatally or possibly postnatally through infected breast milk. Parenterally acquired infection, through transfusion of blood or blood products, occurs in infants, children, and adolescents. Adolescents are also at risk for infection through sexual transmission and through shared needles among intravenous drug users. By January 1987, 1.4 percent of the AIDS cases were in children less than 13 years old, and 0.4 percent were in adolescents 13 to 19 years old. Additionally, 4.4 percent of the total AIDS cases were reported in 20 to 24 year olds, which most likely reflects infection which occurred during adolescence. In children less than 13 years old, infection occurred primarily through perinatal transmission from mothers who were intravenous drug users or sexual partners of intravenous drug users. Adolescent cases of AIDS have followed adult patterns of transmission with most cases resulting from sexual transmission. As the prevalence of infection with the human immunodeficiency virus increases, increases in drug-use-associated transmission in women followed by perinatal transmission to infants and sexual transmission in adolescents seems likely to occur. To prevent further spread, health agencies must develop and target extensive AIDS prevention campaigns at adolescents, young adults, and sexually active women. 5 tables. 61 references. (Author abstract)

** DOCUMENT 3 OF 30 **

ACCN: 114914
TITL: AIDS Education for Adolescents
JCIT: Youth and Society, V 20, N 2 (December 1988), P 180-208
PAUT: Shayne, V T; Kaplan, B J
PDTE: 1988 PAGE: 29 p CLSS: Article
ORIG: United States LANG: English
TYPE: Issue overviews

ANNO: Recent research suggests that while many adolescents are sexually active, they also are misinformed about acquired immunodeficiency syndrome (AIDS) and its prevention.

ABST: A variety of social and developmental factors place adolescents at risk of infection and complicate efforts to modify their attitudes and behaviors. High risk groups, such as homosexual and drug-using adolescents, may be particularly difficult to reach. Current efforts to change attitudes have focused on AIDS education, although there has been controversy regarding program content and delivery. Several States have developed special educational materials and curricula for students. Such programs typically cover the definition, cause, transmission, treatment, prognosis, and prevention of AIDS, as well as related civil rights issues. Curricula are being developed for a variety of chronological and intellectual levels, although many curricula are still considered seriously flawed. Community-based organizations, including religious groups, health care providers, and youth and community agencies, have undertaken AIDS prevention efforts. Government publications, films and videotapes, and public service announcements also have disseminated AIDS information. Programs also are being developed for high risk and groups such as homosexuals and bisexuals, drug users, and minorities. Finally, professional education programs, particularly for educators, are being developed. 93 references.

** DOCUMENT 4 OF 30 **

ACCN: 113837
TITL: Support Groups for Youth With the AIDS Virus
JCIT: International Journal of Group Psychotherapy, V 38, N 2 (April 1988), P 237-251
PAUT: Grant, D
PDTE: 1988 PAGE: 15 p CLSS: Article
ORIG: United States LANG: English
TYPE: Program/project descriptions/evaluations

ANNO: As the AIDS epidemic continues to spread throughout Australia, the incidence of infection is moving from the major risk group of middle-aged homosexual men to involve bisexual men, women, and youth.

ABST: The Albion Street Centre, a screening clinic for the AIDS virus, provides medical management and psychosocial services to infected youth. Support groups for AIDS patients are particularly important because AIDS is a socially stigmatizing and isolating illness. For youth, the stress and anxiety related to a diagnosis of AIDS is compounded by the developmental tasks of adolescence -- the development of identity and the establishment of intimacy. Following medical assessment at the clinic, youth are referred to a counselor who evaluates the clients' social support network and decides if the youth should receive individual or group counseling. Youth deemed suitable for the group are those experiencing the common reactions to diagnosis, such as anxiety, depression, and isolation. The group's goals include providing support and accurate information to minimize the chance of infecting others. The group is open, and the majority of clients generally attend six 2-hour sessions. All members are homosexual males, 18 to 24 years old. In addition to providing clients with an opportunity to express their concerns, information is provided on safe sexual behavior, nutrition, stress management, and modifying substance abuse. Group participation provides clients with support and enables them to deal more pragmatically with their problems. 27 references.

** DOCUMENT 5 OF 30 **

ACCN: 113536
TITL: Report of the Surgeon General's Workshop on Children with HIV Infection and Their Families
CORP: U.S. Department of Health and Human Services, Public Health Service, Bureau of Health Care Delivery and Assistance Divison of Maternal and Child Health, Rockville, MD 20878;
SPON: U.S. Department of Health and Human Services, Public Health Service, Bureau of Health Care Delivery and Assistance Divison of Maternal and Child Health, Rockville, MD 20878;
SALE: National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche. National Institute of Justice/National Criminal Justice Reference Service Paper Reproduction Sales, Box 6000 Department F, Rockville, MD 20850; DO Document.
PDTE: 1987 PAGE: 102 p
ORIG: United States LANG: English
PNUM: DHHS Publication No. HRS-D-MC 87-1
NOTE: Presented in conjunction with The Children's Hospital of Philadelphia
TYPE: Conference/meeting materials

ANNO: This report presents the agenda and proceedings of the third national meeting on pediatric Acquired Immunodeficiency Syndrome (AIDS), held in Philadelphia in April 1987.

ABST: Individual presentations focused on the global epidemiology of AIDS, the nature and transmission of the Human Immunodeficiency Virus (HIV), and the immunology and natural history of pediatric AIDS. Additional discussions focused on supportive care and treatment of pediatric AIDS, education to prevent HIV infection, intravenous drug abuse and women's medical issues, and the transmission of HIV by blood products. Further presentations discussed the legal issues surrounding the medical care, treatment, and research of children; the management of the child with HIV infection; and current developments and future prospects for AIDS vaccines. Work groups presented recommendations in each of these areas. The surgeon general's response, tables, illustrations, and appendixes presenting a list of participants, guidelines for the management of HIV, a list of selected readings, and related materials.

** DOCUMENT 6 OF 30 **

ACCN: 113322
TITL: AIDS and Juveniles: Policy Issues and Problems
JCIT: National Sheriff, V 40, N 4 (August/September 1988), P 53-54, 69
PAUT: Ayres, M
PDTE: 1988 PAGE: 3 p CLSS: Article
ORIG: United States LANG: English
TYPE: Youth-oriented materials

ANNO: While criminal justice professionals have developed policies and procedures for managing adult criminals infected with AIDS, they have not yet developed ways for dealing with juveniles diagnosed as having AIDS.

ABST: When juveniles are infected with AIDS it is necessary to develop policies and procedures for parents, foster parents, and relatives as well as juvenile probation and justice personnel who care for or work with them. Many issues arise when juveniles are carriers of AIDS: testing, counseling, housing, and the confidentiality of medical records. Important decisions must be made about the kinds of immunizations received by children with HIV infection and who should know about them. Child sexual assault victims are at increased risk for AIDS and may require testing for the disease. Because many adolescents are sexually active and engage in drug use, they can unwittingly spread the infection to others. Teenage girls are vulnerable to the disease through heterosexual contact, and they could spread the disease to their unborn children. In addition, homeless and runaway youth often turn to prostitution and are at extremely high risk for the disease. The National Sheriffs' Association, under a recent grant from the Bureau of Justice Assistance, will develop training and model policies and procedures for persons and agencies caring for young people with AIDS.

** DOCUMENT 7 OF 30 **

ACCN: 113195
TITL: Children and AIDS (Acquired Immune Deficiency Syndrome)
JCIT: Social Casework, V 69, N 6 (June 1988), P 348-354
PAUT: Lewert, G
PDTE: 1988 PAGE: 7 p CLSS: Article
ORIG: United States LANG: English

ANNO: Children with AIDS are a small but growing population who present unique policy and practice challenges.

ABST: Social workers must develop an understanding of the needs of this population and their families. Social supports must be created and worker skills must be developed. (Publisher abstract)

** DOCUMENT 8 OF 30 **

ACCN: 113075
TITL: AIDS (Acquired Immune Deficiency Syndrome) and the Runaway Teenager (From North American Directory of Programs for Runaways, Homeless Youth and Missing Children, P 4-12, 1988, by Virginia K Hines -- See NCJ-113074)
PAUT: Williams, L
SALE: American Youth Work Center, 1751 N Street, NW, Washington, DC 20036; DO Document.
PDTE: 1988 PAGE: 8 p
ORIG: United States LANG: English

ANNO: Although adolescents currently account for less than 1 percent of reported acquired immune deficiency syndrome (AIDS) cases, experts believe that they may be the next high-risk group because teens, especially runaways, tend to experiment with both sex and drugs.

ABST: In 1987, 27 percent of adolescents at a New York City shelter for runaways tested positive for AIDS antibodies. Teaching youth about AIDS is difficult; reaching street kids with AIDS prevention messages is even more problematical. Outreach and shelter workers agree that the 'just say no' approach is ineffective with street kids. They have given out condoms and flyers on AIDS risk reduction. They emphasize the importance of using adolescents' own language. The Streetwork Project, an outreach program in New York City uses food to make casual contacts with street kids. Despite their freewheeling sexual behaviors, adolescents often are ignorant about sex, AIDS, and other sexually transmitted diseases. However, evidence from programs in the military and the gay community suggests that AIDS education can be effective in getting individuals to modify their risky behaviors. A national AIDS hotline and a variety of public information materials on AIDS and its transmissions and prevention are available. Public and private organizations offering information, services, and other resources on AIDS and adolescents are listed.

** DOCUMENT 9 OF 30 **

ACCN: 112986
TITL: AIDS (Acquired Immune Deficiency Syndrome) Policies for Juveniles: LA (Los Angeles) County Examines the Issue
JCIT: Corrections Today, V 50, N 5 (August 1988), P 190, 192, 194
PAUT: Baker, C J; Nidorf, B
PDTE: 1988 PAGE: 3 p CLSS: Article
ORIG: United States LANG: English
TYPE: Program/project descriptions/evaluations

ANNO: Because of the high incidence of acquired immune deficiency syndrome (AIDS) in Los Angeles County, a committee was established to examine AIDS-related issues affecting staff and youth in the county's juvenile institutions.

ABST: The committee found that while many issues affecting adult corrections also applied to juveniles, these were complicated by the care and treatment role of juvenile facilities and differences in the rights of minors. The committee recommended against mass screening of juveniles because of the low number of adolescent AIDS cases, problems with consent, the possibility of discrimination, and the increased need for counseling. It suggested that testing only be performed when medically indicated, ordered by a physician, and consented to by the minor. The committee recommended that test results and related information be maintained in separate, confidential folders; that minors receive counseling on the pros and cons of being tested for the AIDS antibody; and that only the minor should be informed of negative results, but various care and service providers should be informed of positive results. It also recommended that asymptomatic seropositives not be segregated, that juveniles with AIDS-related complex be assigned housing on a case-by-case basis, and that those with AIDS be housed in the infirmary until a suitable treatment program was found. The committee also assisted in the development of a staff training program and an AIDS education and prevention program for detained minors.

** DOCUMENT 10 OF 30 **

ACCN: 112731
TITL: Adolescents and Prevention of AIDS
JCIT: Professional Psychology: Research and Practice, V 19, N 4 (August 1988), P 403-408
PAUT: Melton, G B
PDTE: 1988 PAGE: 6 p CLSS: Article
ORIG: United States LANG: English

ANNO: For adolescents to learn to avoid behavior that increases the risk of human immunodeficiency virus (HIV) infection, educational programs must increase the personal salience of such risks.

ABST: Information about risks should be complemented by problemsolving programs designed to counteract social inhibitions on the use of contraceptives and environmental manipulations designed to increase access to condoms. Market-based regulatory strategies show some potential to decrease needle-sharing among drug abusers. There is a compelling need for a large behavioral research initiative to develop a body of knowledge necessary for the prevention of HIV infection among adolescents. Social inhibitions about studying 'adult' behaviors among juveniles should be overcome, and legal protection of the privacy of juvenile research participants should be expanded. Research should proceed in four broad areas. First, there is a need for descriptive studies about adolescent sexual behaviors, intravenous drug use, and other risk-taking behaviors. Research on basic developmental processes should be expanded, particularly in the area of cognitive and social factors that affect risk perception. Attention also should be given to the development of sexual identity and its relation to the initiation of certain sexual behaviors. Field experiments are needed to examine the effects of prevention strategies among particular groups of adolescents. Finally, longitudinal studies are needed in each of there previous areas to identify precipitants of risky behavior, factors in attitudinal and behavioral modification, and problems in the maintenance of behavior change. 41 references. (Author abstract modified)

** DOCUMENT 11 OF 30 **

ACCN: 112695
TITL: Acquired Immune Deficiency Syndrome (AIDS) Information and Guidelines: Placement of Infants, Children and Adolescents with HIV in Nursery, Day Care, Preschool or School Settings and in Foster Care or Small Group Homes
CORP: Hawaii Department of Health, AIDS Advisory Committee;
PDTE: 1986 PAGE: 38 p CLSS: Document
ORIG: United States LANG: English
TYPE: Legislation/policy descriptions

ANNO: This document provides guidelines for the placement of infants, children, and adolescents with human immunodeficiency virus (HIV) in nursery, day care, preschool and school settings, and in foster care or small group homes.

ABST: Background information describes acquired immunodeficiency syndrome, its cause, treatment, and prevention. Risk factors for HIV infection are delineated, and ways HIV can and cannot be transmitted are discussed. Legal and confidentiality issues of concern to those working with HIV-infected children are noted. General guidelines cover placement decisionmaking factors, screening, infection control procedures and hygiene, and public education. It is noted that for most HIV-infected children, the risk of HIV transmission is outweighed by the benefits of placement in an unrestricted setting; but that risks and benefits to the infected child and to others must be weighed in each case. Additional guidelines cover school placement of HIV-infected students and placement of children and youth with other infectious diseases. Risk reduction guidelines cover hygiene and provisions for personal and environmental cleanliness, handwashing, techniques for handling body fluids and food and utensils, techniques for storing and cleaning items, waste disposal, and selection of environmental disinfectants and germicidal handwash. Additional information on HIV and occupational safety are appended. 6 references.

** DOCUMENT 12 OF 30 **

ACCN: 112502
TITL: Report of CWLA (Child Welfare League of America) Task Force on Children and HIV Infection: Initial Guidelines
CORP: Child Welfare League of America, Washington, DC 20001;
SALE: Child Welfare League of America, 440 First Street, NW, Washington, DC 20001; DO Document.
PDTE: 1988 PAGE: 60 p
ORIG: United States LANG: English
PNUM: ISBN 0-87868-339-9
TYPE: Legislation/policy analysis

ANNO: This task force report provides guidelines and suggests public policy related to the provision of services to children and families based on what is known legally, medically, and in social work practice about the care and management of children infected with human immunodeficiency virus (HIV).

ABST: Following a medical and legal review of issues related to HIV infection in children, the need for community education and prevention efforts is discussed. Agency administrative policy guidelines then are presented, based on the philosophy that HIV-infected children should be served within existing services whenever possible. Guidelines cover personnel issues, issues impacting caregivers, confidentiality, HIV testing, research and evaluation, and funding. Additionally, guidelines for the provision of specific services are presented, including those for foster care, group homes and residential treatment facilities, adoption, homemaker and respite care, day care, teen pregnancy and parenting and counseling services, and schools. Program procedures consider infection control issues and inservice training and staff development. Additional program concerns are addressed in the areas of prevention, placement services, day care, assessment, treatment planning, and record-keeping. Public policies are discussed with a focus on service, prevention and education, testing, civil rights, confidentiality, and financing. Appendixes provide a list of definitions, selected publications and resources, a listing of taskforce members, and a 49-item bibliography.

** DOCUMENT 13 OF 30 **

ACCN: 112302
TITL: Risk Profile Comparison of Runaway and Non-Runaway Youth
JCIT: American Journal of Public Health, V 78, N 7 (July 1988), P 820-821
PAUT: Yates, G L; Mackenzie, R; Pennbridge, J; Cohen, E
PDTE: 1987 PAGE: 2 p CLSS: Article
ORIG: United States LANG: English
TYPE: Studies/research reports

ANNO: All initial visits (765) to an outpatient medical clinic during 1985 were analyzed to compare the medical profiles of the runaway and nonrunaway youths.

ABST: Medical data were collected from the charts of the subjects, and all patients were interviewed using the Childrens Hospital Adolescent Risk Profile Interview. The areas of risk contribution examined were the home, education, activities/affect, drug use, and sex/suicide. Of the 765 patients, 110 were self-identified runaways, and 655 were nonrunaways. Based on the findings, runaway street youth are at greater risk for a wide variety of medical problems and of health-compromising behaviors, including suicide and depression, prostitution, and drug use. The high level of intravenous drug use reported by the runaways, in addition to the reported involvement in prostitution and the greater likelihood of gay or bisexual lifestyle, places this group in a high-risk category for contracting and transmitting AIDS (acquired immune deficiency syndrome). There was also a high percentage of sexual abuse among the runaways. 3 tables and 10 references. (Author abstract modified)

** DOCUMENT 14 OF 30 **

ACCN: 112067
TITL: AIDS (Acquired Immune Deficiency Syndrome): Suggested Policy for Youth Service Programs
CORP: Shippensburg University, Center for Juvenile Justice Training and Research, Shippensburg, PA 17257;
SALE: Shippensburg University, Center for Juvenile Justice Training and Research, Shippensburg, PA 17257; DO Document. National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche.
PDTE: 1988 PAGE: 16 p
ORIG: United States LANG: English
TYPE: Legislation/policy descriptions

ANNO: This document provides guidelines for a suggested acquired immune deficiency syndrome (AIDS) policy for youth services programs.

ABST: It is suggested that there should be no mandatory human immunodeficiency virus testing for youth service clients, and that agency teting should occur only under specified conditions (e.g., presence of clinical symptoms, client request). Youth who are diagnosed as seropositive or who have AIDS related complex or AIDS should be served in the general population unless medical conditions require otherwise. The equipment recommended by the Centers for Disease Control, generally used to eliminate blood and body fluid contact and minimize risk of infection, should be made available to all agencies. Case information on infected individuals must remain strictly confidential, and there should be made available to all agencies. Case information on infected individuals must remain strictly confidential, and there should be an explicit rationale identifying agency personnel with a need to know. Eduation and training are viewed as key factors in reducing the risk of transmission. All agencies must provide age-appropriate and comprehensive training for clients and staff. Agencies are advised to formalize AIDS policy in writing and to communicate these policies to staff and clients. 3 references and list of information resources.

** DOCUMENT 15 OF 30 **

ACCN: 111697
TITL: Pediatric AIDS (Acquired Immune Deficiency Syndrome): Hearing Before the House Select Committee on Narcotics Abuse and Control, July 27, 1987
CORP: US Congress House Select Committee on Narcotics Abuse and Control, Washington, DC 20510;
SALE: Washington Star-News; DO Document. National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche.
PDTE: 1988 PAGE: 197 p
ORIG: United States LANG: English
NOTE: SCNAC-100-1-10
TYPE: Legislative hearings/committee prints/reports

ANNO: Testimony by public officials; physicians, including the Surgeon General; and substance abuse service providers examine issues related to pediatric acquired immune deficiency syndrome (AIDS).

ABST: The growing incidence of pediatric AIDS is discussed, and its high incidence among blacks and Hispanics involved in intravenous drug abuse is noted, with special reference to the situation in New York City. The high fatality rates among infants infected in utero with the AIDS virus and issues in caring for such children, many of whom are abandoned by their drug-abusing mothers, are discussed. Programs currently addressing some of these issues are described including hospital, day care, and residential programs for children with AIDS. Initiatives for dealing with the growing crisis are advocated, including revisions in the reimbursement system for medical care, development of foster care options for abandoned AIDS infants, increased training for caregivers and service providers, expanded outreach, and increased support services for families trying to cope with AIDS. Emphasis also is placed on the need for an all-out war on drugs through increased interdiction, law enforcement, and drug education and rehabilitation. The need for increased health education, focusing on strategies for reducing the risk of AIDS transmission, also is urged.

** DOCUMENT 16 OF 30 **

ACCN: 111296
TITL: Preventing the Sexual Transmission of AIDS (Acquired Immune Deficiency Syndrome) During Adolescence
JCIT: Journal of Adolescent Health Care, V 9, N 2 (March 1988), P 139-143
PAUT: Remafedi, G J
PDTE: 1988 PAGE: 5 p CLSS: Article
ORIG: United States LANG: English

ANNO: This article discusses the importance of focusing on youth in containing the spread of Acquired Immunodeficiency Syndrome (AIDS).

ABST: Knowledge of adolescent sexual behavior, drug use, and sexually transmitted diseases suggests that many adolescents are in jeopardy of acquiring Human Immunodeficiency Virus (HIV) infections. Therefore, they are among those most likely to benefit from preventive efforts as they explore adult roles and lifestyles. Education should target homosexually active young men and use a variety of approaches and media, both inside and outside the classroom. Learning about AIDS is most likely to effect behavioral change when accompanied by other programs to build social supports, self-esteem, and positive identity. The ethical and rational use of HIV antibody testing may be a helpful adjunct to education for certain adolescents. 29 references. (Author abstract modified)

** DOCUMENT 17 OF 30 **

ACCN: 110864
TITL: Children With AIDS (Acquired Immune Deficiency Syndrome) (From AIDS: Principles, Practices, and Politics, P 167-173, 1988, Enge B Corless and Mary Pittman-Lindemann, eds. -- See NCJ-110857)
PAUT: Grossman, M
SALE: Hemisphere Publishing Corp, 1025 Vermont Avenue, NW, Washington, DC; DO Document.
PDTE: 1988 PAGE: 7 p
ORIG: United States LANG: English

ANNO: The increase in heterosexual transmission of acquired immune deficiency syndrome (AIDS) with result in increasing numbers of infected children with special needs.

ABST: Children can acquire infection with the human immunodeficiency virus in four ways: (1) vertical transmission from the mother, through infection carried by blood, (2) blood products or transplanted organs, (3) child abuse, and (4) for adolescents, through sexual intercourse. Three-quarters of the reported cases have resulted from perinatal transmission. Most of these children appeared normal at birth. Infected infants become symptomatic somewhere between 8 and 15 months of age. Initial signs are failure to thrive, chronic diarrhea, and developmental delays. Enlarged lymph nodes, liver, and spleen also develop. Unlike adult patients, these children are peculiarly susceptible to common bacterial infections like middle ear infection and pneumonia. The majority live less than 3 years and die with opportunistic infections. Management of perinatal AIDS infections has to begin with the education of women in the high risk group. The pediatrician should also be informed if the mother is antibody-positive. Shelter or foster care needs raise difficult issues. Infected children should probably not attend day care until age 3. Prevention of pediatric AIDS means the prevention of infection of women of childbearing age, the prevention of pregnancy in women known to be infected, and consideration of pregnancy termination in infected individuals. 17 references.

** DOCUMENT 18 OF 30 **

ACCN: 110473
TITL: Minorities and AIDS (Acquired Immune Deficiency Syndrome): Knowledge, Attitudes, and Misconceptions Among Black and Latino Adolescents
JCIT: American Journal of Public Health, V 78, N 1 (1988), P 55-57
PAUT: DiClemente, R J; Boyer, C B; Morales, E S
PDTE: 1988 PAGE: 3 p CLSS: Article
ORIG: United States LANG: English
TYPE: Surveys/analyses

ANNO: This study examines the knowledge, attitudes, and misconceptions about AIDS among minorities in San Francisco high schools.

ABST: The results reveal that white adolescents were more knowledgeable than Black adolescents about the cause, transmission, and prevention of AIDS. Black adolescents were more knowledgeable than their Latino peers. Black and Latino adolescents were approximately twice as likely as White adolescents to have misconceptions about the casual transmission of AIDS. Greater levels of perceived risk of contracting AIDS were associated with deficient knowledge and prevalent misconceptions. (Author abstract modified)

** DOCUMENT 19 OF 30 **

ACCN: 109433
TITL: Enforcing the Right to a Public Education for Children Afflicted With AIDS (Acquired Immune Deficiency Syndrome)
JCIT: Emory Law Journal, V 36, N 2 (Spring 1987), P 603-648
PAUT: Brockman, L N
PDTE: 1987 PAGE: 46 p CLSS: Article
ORIG: United States LANG: English

ANNO: Allowing children with Acquired Immunodeficiency Syndrome (AIDS) to attend public school, with certain precautions based on present medical knowledge, is both logical and simple in its application.

ABST: Three courses of action are possible: (1) exclusion based on the theory that AIDS is a communicable disease, (2) inclusion based on the theory that AIDS is a handicap, or (3) inclusion based on present medical knowledge about the disease. Following either of the first two theories presents problems of application and practicability. In addition, research has shown that AIDS is not transmitted through casual contact. Informing parents of this research would help alleviate the fear of AIDS. Once the fear has declined, the protests and lawsuits from parents who do not want their children exposed to classmates with AIDS will end. 250 footnotes. (Author summary modified)

** DOCUMENT 20 OF 30 **

ACCN: 109394
TITL: AIDS (Acquired Immune Deficiency Syndrome): What Does It Mean to You?
PAUT: Hyde, M O; Forsyth, E H
SALE: Walker, 720 Fifth Avenue, New York, NY 10019; BK Book.
PDTE: 1987 PAGE: 116 p
ORIG: United States LANG: English
PNUM: ISBN 0-8027-6699-4
TYPE: Youth-oriented materials

ANNO: Written for a youthful audience, this book presents current information about AIDS and explores great epidemics since Biblical times.

ABST: Causes of AIDS are discussed, along with methods of prevention. Compassion for AIDS patients is emphasized in accounts of individual experiences with AIDS. Past epidemics and plagues, such as cholera, are recounted. Also discussed is the epidemic of fear of AIDS, which has caused people to shun AIDS patients and avoid high-risk populations. Medical progress in treating AIDS and in research into the cause of AIDS is delineated. The Surgeon General's Report and a list of groups offering AIDS information and support are included. Glossary and index.

** DOCUMENT 21 OF 30 **

ACCN: 109327
TITL: AIDS (Acquired Immune Deficiency Syndrome) and Teenagers: Emerging Issues -- Hearing Before the House Select Committee on Children, Youth, and Families, June 18, 1987
CORP: US Congress House Select Committee on Children, Youth, and Families, Washington, DC 20515;
SALE: Superintendent of Documents Congressional Sales Office GPO, Washington, DC 20402; DO Document. National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche.
PDTE: 1987 PAGE: 239 p
ORIG: United States LANG: English
TYPE: Legislative hearings/committee prints/reports

ANNO: A congressional hearing held in June 1987 focused on the growing AIDS crisis, its impact on teenagers, and ways of protecting adolescents from AIDS.

ABST: The committee heard testimony about the incidence of AIDS from among 13- to 19-year olds, the extent of the risk, teenagers' attitudes and knowledge about AIDS, school policies about AIDS, and guidelines of the Centers for Disease Control. Speakers included the U.S. Surgeon General, medical school professors, and representatives of a public school district, a youth organization, and a teen AIDS hotline. They noted that about 2.5 million teenagers are affected by some kind of sexually transmitted disease each year. More than 80 percent of unmarried males and 70 percent of unmarried females have experienced intercourse by age 20. Only 1 percent of AIDS cases has occurred among teenagers. Most teenagers do not believe that they are at risk. Speakers recommended extensive AIDS education with the encouragement and information from the Federal Government. Written testimony and figures.

** DOCUMENT 22 OF 30 **

ACCN: 109151
TITL: Kappan Special Report -- Children With AIDS (Acquired Immune Deficiency Syndrome): How Schools Are Handling the Crisis
JCIT: Phi Delta Kappan, V 69, N 5 (January 1988), P K1-K12
PAUT: Reed, S
SALE: National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche. National Institute of Justice/National Criminal Justice Reference Service Paper Reproduction Sales, Box 6000 Department F, Rockville, MD 20850; DO Document.
PDTE: 1988 PAGE: 12 p
ORIG: United States LANG: English

ANNO: Major variations exist in the way that school systems handle cases of children with AIDS and in the content and timing of AIDS education in public schools.

ABST: In Wilmette, Ill., an elementary school community has accepted the presence of a child with AIDS in the school and has protected the child's privacy. In contrast, the Ray family in Florida experienced major problems and the destruction of their home by suspected arson during their efforts to have their three hemophiliac sons educated in the local school. Confidentiality about the child's identity and rapid efforts to inform and educate the community appear to be the crucial factors in smooth handling of AIDS cases among schoolchildren. This illness has caused more fear and hysteria than any disease since the epidemics of influenza in 1918 and polio in the 1940's and 1950's. The American Academy of Pediatrics has agreed with the United States Centers for Disease Control that school age children with AIDS should be allowed to attend school, unless they are aggressive children who bite, children who cannot control their bodily excretions, and children with open lesions. The Federal Government has been accused of being slow to respond to the AIDS crisis. However, the National Institute of Justice is establishing a data bank to help police officers. Polls show that most Americans are aware of AIDS and favor AIDS instruction in school sex education classes. States have varied widely in their decisions about how best to educate people, however. Photographs and resource lists.

** DOCUMENT 23 OF 30 **

ACCN: 109078
TITL: Acquired Immunodeficiency Syndrome and Adolescents: Knowledge, Beliefs, Attitudes, and Behaviors
JCIT: Pediatrics, V 79, N 5 (May 1987), P 825-828
PAUT: Strunin, L; Hingson, R
CORP: National Institute on Alcohol Abuse and Alcoholism, Rockville, MD 20857;
PDTE: 1987 PAGE: 4 p CLSS: Article
ORIG: United States LANG: English
GNUM: R01-AA06494-03; 1025-5
TYPE: Studies/research reports

ANNO: Results of a 1986 random-sample survey of 860 16- to 19-year-old adolescents in Massachusetts indicate that many are still misinformed or confused about acquired immune deficiency syndrome (AIDS) and AIDS transmission.

ABST: Of respondents, 70 percent reported being sexually active, but only 15 percent had changed their sexual behavior because of concern about contracting AIDS. Only 20 percent of those who had changed their sexual behavior used effective methods of preventing transmission. Only 8 percent of respondents did not know that AIDS can be transmitted by heterosexual intercourse. While psychoactive drugs other than alcohol and marijuana had been used by 13 percent, only 8 percent of these did not know that AIDS can be transmitted by intravenous drug use. The majority of respondents knew a relationship exists between AIDS and other blood and body fluids, but knowledge of the mode of transmission was limited. No significant differences in knowledge of AIDS transmission via sexual behavior was found between sexually active and nonactive youth, nor was there a significant difference in knowledge of the AIDS-drug use relationship between psychoactive drug users and nonusers. Results suggest a need for systematic educational efforts to reduce confusion and misinformation in this population. 2 tables and 13 references. (Publisher abstract modified)

** DOCUMENT 24 OF 30 **

ACCN: 109077
TITL: Adolescents and AIDS (Acquired Immune Deficiency Syndrome): A Survey of Knowledge, Attitudes and Beliefs About AIDS in San Francisco
JCIT: American Journal of Public Health, V 76, N 12 (December 1986), P 1443-1446
PAUT: DiClemente, R J; Zorn, J; Temoshok, L
PDTE: 1986 PAGE: 4 p CLSS: Article
ORIG: United States LANG: English
TYPE: Studies/research reports

ANNO: A questionnaire was administered to 1,326 San Francisco adolescents to assess their attitudes toward and knowledge of the cause, transmission, and treatment of acquired immune deficiency syndrome (AIDS) and the need for AIDS education.

ABST: Findings suggest that high school students possessed some knowledge of AIDS, but that this knowledge was uneven. While 92 percent knew sexual intercourse to be a mode of transmission, only 60 percent knew that using condoms could lower the risk of transmission. Only 68 percent knew that AIDS could not be transmitted through casual contact, and only 41 percent correctly reported that kissing was not a route of transmission. In the area of attitudes, 78.7 percent reported being afraid of getting AIDS, 50.6 percent would rather contract any other disease than AIDS, and 87.6 percent felt it was important for students to receive AIDS education in the school curriculum. Results suggest that there is a need for the development and implementation of a health education curriculum on AIDS for this population. 2 tables and 9 references.

** DOCUMENT 25 OF 30 **

ACCN: 109074
TITL: AIDS (Acquired Immune Deficiency Syndrome) and Adolescents: The Time for Prevention Is Now
PAUT: Haffner, D W
CORP: Center for Population Options, Washington, DC 20005;
SALE: Center for Population Options, 1012 14th Street, NW, Suite 1200, Washington, DC 20005; DO Document. National Institute of Justice/ National Criminal Justice Reference Service Microfiche Program, Box 6000, Department F, Rockville, MD 20850; MF Microfiche.
PDTE: 1987 PAGE: 24 p
ORIG: United States LANG: English
TYPE: Training materials

ANNO: This report provides information about acquired immune deficiency syndrome (AIDS) and recommendations for AIDS education programs for adolescents.

ABST: AIDS education is urgently needed because adolescents are increasingly at high risk of infection as a result of misinformation and their involvement in unsafe sexual behaviors. The goals of AIDS prevention programs for adolescents are to reduce panic and misinformation, delay initiation of sexual intercourse, ensure that sexually active youth use condoms consistently and effectively, and reduce experimentation with drugs, especially intravenous drug use. AIDS education is a responsibility shared by schools, parents, religious organizations, community and health organizations, and youth-serving agencies. Educational programs for youth should cover how AIDS is and is not transmitted and how the risk of infection can be minimized. Such education should be in easily understood language, should emphasize safe sexual behaviors, discuss the dangers of intravenous drug use, and focus on high-risk behaviors. Experienced sexuality educators are well positioned to teach students about AIDS, although other leaders may be appropriate. In addition, teens can themselves be very effective AIDS educators. Educational materials should be selected that provide accurate, age-appropriate, relevant information. 42 references.

** DOCUMENT 26 OF 30 **

ACCN: 108975
TITL: AIDS (Acquired Immune Deficiency Syndrome) in Adolescents: A Rationale for Concern
JCIT: New York State Journal of Medicine, V 87, N 5 (May 1987), P 290-295
PAUT: Hein, K
SPON: Carnegie Corporation of New York, New York, NY 10036;
PDTE: 1987 PAGE: 6 p CLSS: Article
ORIG: United States LANG: English
NOTE: Based on a presentation at the Symposium on the Heterosexual Transmission of AIDS on October 21, 1986, at the New York Academy of Medicine.

ANNO: Because of contemporary American adolescent lifestyles, teenagers are an important group for targeted interventions to prevent the further spread of the human immunodeficiency virus (HIV).

ABST: Factors that make adolescents a high-risk group for HIV infection are patterns of adolescent sexual activity, the age of initiation of first intercourse, current contraceptive practices among teenagers, and the choice of sexual partners. The high rates of venereal diseases and anatomic and physiologic considerations also have a bearing on adolescents' vulnerability to HIV infection. Although adolescents are not significantly involved in IV drug use, they are at risk of being infected through sexual activity with the high percentage of young adults involved in IV drug use. Adolescents are a potentially high-risk group for HIV infection, and they should be targeted with primary prevention programs. 8 figures and 19 references.

** DOCUMENT 27 OF 30 **

ACCN: 108615
TITL: Coming of Age on City Streets
JCIT: Psychology Today, V 22, N 1 (January 1988), P 28-37
PAUT: Hersch, P
PDTE: 1988 PAGE: 10 p CLSS: Article
ORIG: United States LANG: English

ANNO: Based on observations at Covenant House, New York City's largest shelter for runaway children, and interviews with professionals involved with runaways in other cities, this article profiles runaways and their high risk for getting AIDS.

ABST: Thirty-six percent of the runaway and homeless youth who come to shelters have experienced physical and sexual abuse in their families; 44 percent have been exposed to other long-term family crises such as drug-abusing, alcoholic parents or stepfamily crises; and 20 percent have had to deal with short-term crises such as divorce, sickness, death, and school problems. Most are ill-equipped to obtain jobs with a living wage, so they become prostitutes, which exposes them to multiple sex partners. Many know about acquired immune deficiency syndrome (AIDS), but they do little to reduce their likelihood of catching it. Their intravenous drug use and the injection of hormones exposes them to another means by which AIDS is transmitted. Among a small sample of kids tested for the AIDS antibodies at Covenant House, 27 percent tested positive, and more and more of the kids seen on the streets are sick, and their illnesses seem clinically related to AIDS. Obstacles to prevention and treatment make it likely that runaway and homeless adolescents will become a major segment of the population that contracts and transmits AIDS.

** DOCUMENT 28 OF 30 **

ACCN: 108140
TITL: Teaching AIDS: A Resource Guide on Acquired Immune Deficiency Syndrome
PAUT: Quackenbush, M; Sargent, P
SALE: Network Publications, PO Box 1830, Santa Cruz, CA 95061; PB Paperback.
PDTE: 1986 PAGE: 124 p
ORIG: United States LANG: English
PNUM: ISBN 0-941816-25-7
TYPE: Curricula

ANNO: Intended for use in teaching high school students about acquired immunodeficiency syndrome (AIDS), this manual presents basic information about AIDS and safe and unsafe sexual activities, teaching plans for seven types of units about AIDS, teaching materials, and background materials.

ABST: An introduction explains how to use the curriculum and lists the four essential concepts that students should understand at the end of a unit: (1) AIDS is a viral disease, not a gay disease, (2) AIDS is not easily transmitted, (3) under the proper circumstances, anyone can contract AIDS; and (4) people can protect themselves against AIDS. Basic information about AIDS is next presented using a question-and-answer format. The teaching plans include a basic unit designed for widespread use as well as specialized units for use in social studies, psychology, science, and sex education classes. Each plan includes the target audience, the goal and objectives, the format and content, materials, time, and additional comments. Worksheets, a test, discussion of problems and suggested solutions related to the teaching about AIDS, and additional background information.

** DOCUMENT 29 OF 30 **

ACCN: 107950
TITL: School Children With AIDS (Acquired Immune Deficiency Syndrome) (From AIDS and the Law: A Guide for the Public, P 66-80, 1987, Harlon L Dalton and Scott Burris, eds. -- See NCJ-107949)
PAUT: Kass, F C
SALE: Yale University Press, 92a Yale Station, New Haven, CT 06520; DO Document.
PDTE: 1987 PAGE: 15 p
ORIG: United States LANG: English

ANNO: This article reviews the characteristics of human immunodeficiency virus infection in children and discusses principal related legal issues addressed by the courts.

ABST: As of December 8, 1986, 394 children under the age of 13 were reported by the Centers for Disease Control (CDC) to have AIDS. Most of the cases resulted from perinatal transmission of the virus from infected mothers linked to drug abuse. Thirteen percent of the cases resulted from blood transfusions. A major social and legal issue associated with AIDS in children is their right to a free public education and the risks of transmission in the school setting. The CDC guidelines for the education of children with AIDS indicates that most children with AIDS pose no risk to others in the typically casual contacts of the school setting but that each case should be evaluated by a multidisciplinary team. Problematic aspects of the guidelines are the absence of a mechanism for determining which children to review, the lack of guidelines for confidentiality, the logistics of the recommended screening of all high-risk infants, and failure to address the possibility of sexual transmission of the virus among school children. A review of specific court cases involving children with AIDS in New York State, New Jersey, and Indiana focuses on decisionmaking authority, constitutional issues, and the Federal 1973 Rehabilitation Act; statutory issues and the Education of the Handicapped Act; and administrative law issues.

** DOCUMENT 30 OF 30 **

ACCN: 107635
TITL: Developing an AIDS (Acquired Immune Deficiency Syndrome) Program in the Juvenile Detention Center
PAUT: Gelber, S
PDTE: 1987 PAGE: 13 p CLSS: Document
ORIG: United States LANG: English
TYPE: Program/project descriptions/evaluations

ANNO: This assessment of current responses to the threat of AIDS (acquired immune deficiency syndrome) at the Dade County Juvenile Justice Detention Center (Florida) indicates that a reasonable effort is being made, but improvements are needed in testing and screening, counseling, and preventive education.

ABST: On July 10, 1987, a group of local and State public officials met to assess the content and quality of the present AIDS program at the detention center. Currently, the center only conducts AIDS blood tests on detainees with symptoms of the AIDS virus. The assessment group recommends that testing also be conducted on all detainees in a defined high-risk group. Those testing positive for the AIDS virus should receive 24-hour supervision to control improper sexual behavior and other physical contact capable of transmitting the virus. Also, an emergency AIDS shelter should be established. Counseling is essential not only for the well-being of the AIDS victim but also for those who may be susceptible by accident or design. Although the incidence of AIDS among juveniles is low, there is a rapid increase in the disease among 20 to 29 year olds. Given the threat of AIDS in this age group, preventive education should be the centerpiece of the center's program. The plan is to include a 3-week preventive education program on AIDS in the center's curriculum. Staff will be trained in the medical significance of AIDS and the handling of juveniles with AIDS-related problems.